



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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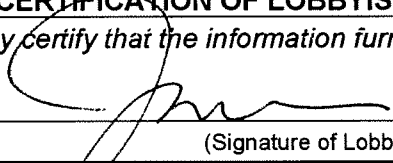
LOBBYIST REGISTRATION FORM

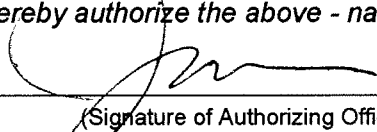
(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)		(First)	(Middle)	TELEPHONE
WAGNER		KEONI		808-838-6778
MAILING ADDRESS (Street)				FAX
P.O. Box 30008				808-835-3690
(City)		(State)	(Zip Code)	
HONOLULU		HI	96820	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
MAILING ADDRESS (Street)				FAX
(City)		(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
HAWAIIAN AIRLINES, INC.			808-835-3700
MAILING ADDRESS (Street)			FAX
P.O. Box 30008			808-835-3690
(City)		(State)	(Zip Code)
HONOLULU		HI	96820
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)		(State)	(Zip Code)

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	<u>1/29/07</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY	
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
<u>KEONI WAGNER</u>	
NAME OF ORGANIZATION (if applicable)	TELEPHONE
<u>HAWAIIAN AIRLINES, INC</u>	<u>808-838-6778</u>
MAILING ADDRESS (Street)	FAX
<u>PO BOX 30008</u>	
(City)	(State)
<u>HONOLULU</u>	<u>HI</u>
(Zip Code)	
<u>96820</u>	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>	
	<u>2/12/07</u>
(Signature of Authorizing Officer or Person Represented)	(Date)